PETITION FOR EXTENSION OF TIME UNDI		Docket Number 20959/2090 (P 6266
157	ER 37 CFR 1.136(a) In re Application of Moszner	
CERTIFICATE OF MAILING I hereby certify that this correspondence is being	in re Application of Moszner	et ai.
deposited with the United States Postal Service with	Application Number 10/658,	993 Filed September 10, 2
sufficient postage for first class mail in an envelope addressed to Mail Stop AF, Commissioner for	For POLYMERIZABLE BICYCLIC CYCLOPROPANE	
Patents, P.O. Box 1450, Alexandria, VA 22313- 1450, onApril 5, 2007		R USE FOR THE PREPARATION OF
During & Ti	DENTAL MATERIALS	
Signature: Ruth R. Smith	Group Art Unit 1714	Examiner Tae H. Yoon
This is a request under the provisions of	627 CEP 1 126(a) to output th	no period for filing a
reply in the above identified application		ie period for minig a
The requested extension and appropria		
(check time period desired):	ac entity fee are as follows	
☑ One month (37 CFR 1.17	/(a)(1)) _ (\$60/\$120)	\$ 120
☐ Two months (37 CFR 1.17		\$\$
_ ` ' ' ' ' ' '		
		\$
Four months (37 CFR 1.1	,,,,,	\$
Five months (37 CFR 1.1		\$
Applicant claims small entity statu		
A check to cover the fee is enclose		
Payment by credit card. Form PT	O-2038 is attached.	
The Commissioner has already be application to a Deposit Account.	en authorized to charge fees in	this
The Director is hereby authorized		
credit any overpayment, to Deposi duplicate copy of this sheet.	it Account Number 141138.	have enclosed a
	is form may become public	Credit card information should not b
included on this form. Provide		
I am the applicant/inventor		
assignee of record of the	entire interest. See 37 CFR 3.7	71.
Statement under 37 0	CFR 3.73(b) is enclosed. (For	n PTO/SB/96).
attorney or agent of recor	rd.	
attorney or agent under 3	7 CFR 1.34(a).	
	if acting under 37 CFR 1.34(a)

04/10/2007 SSESHE1 00000080 141138 10658993

Joseph M. Noto

Typed or printed name

forms are submitted.

01 FC:1251 120.00 DA

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

(585) 263-1601 Telephone Number

☐ Total of